## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Fatent, advance orders and notification of maintenance feet will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate FEE ADDRESS for maintenance fee notifications

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

05/27/2009 22850 7590

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

CUSTOMER NUMBER

22850

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

				(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/500 045	10/01/2004	Cumia Cuda	250727HS0VPCT	7750

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	08/27/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
YEE, DEBORAH		1793	148-334000	•			
Change of correspondence address or indication of "Tee Address" (37 FR 1.56s).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/147, Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the paster front page, list (1) the names of up to 1 registered pattent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 registered pattent attorneys or agents. If no name is listed, no name will be printed.				
(A) NAME OF ASS 1) KABUSH 2) SUNCAL		DBE SEIKO SHO	2		ry) Japan Japan		
Si Issue Fee     Publication Fee (No small entity discount permitted)     Advance Order - # of Copses			b. Psyment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ② Psyment by credit card. Transmitted via EFS-Web. ③ The Director is hereby suthorized to charge the required fee(s), any deficiency, or credit any overprisonal, to be Director is never a copy of this for overprisonal, to be Depaid Account Number (1 ≥ − 0)33.0 (section as extra copy of this for				
hange in Entity St	atus (from status indicate	d above) is. See 37 CFR 1.27.		ger claiming SMALL EN			

Registration No. 58.014 Typed or printed name This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to fill (ead by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 12.2 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and applications, properlying and the individual case. Any comments on the support of the USPTO to process an application of the USPTO. There will vary deepending upon the insulvibudal case. Any comments on the complete application. There will vary deepending upon the insulvibudal case. Any comments of the complete application of the USPTO to the will vary deepending upon the insulvibudal case. Any comments of the complete application of the USPTO to the US

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